



Advances in Social Science, Education and Humanities Research

[SERIES HOME](#)

[VOLUMES](#)

[SEARCH](#)

[AIMS & SCOPE](#)

[PUBLISHING INFO](#)



ISSN (Online):

2352-5398

ISSN (Print):

N/A

Series Editor(s):

Wadim Strielkowski, Jiuqing Cheng

[View Editor Information](#)

[NEW CONTENT ALERTS](#)

The proceedings series ***Advances in Social Science, Education and Humanities Research*** aims to publish proceedings from conferences on the theories and methods in fields of social sciences, education and humanities. [Read full Aims & Scope](#)

All proceedings in this series are **open access**, i.e. the articles published in them are

[HOME](#)

[PREFACE](#)

[ARTICLES](#)

[AUTHORS](#)

[ORGANIZERS](#)

[PUBLISHING INFORMATION](#)

Series: [Advances in Social Science, Education and Humanities Research](#)

Proceedings of the 4th ASEAN Conference on Psychology, Counselling, and Humanities (ACPCH 2018)

Advisory Board

Varot Sripiroj

Tapee University, Surat Thani Thailand

Latipun Sudarsono

University of Muhammadiyah Malang, Indonesia

Akhsanul In'am

University of Muhammadiyah Malang, Indonesia

Nor Shafrin Ahmad

Universiti Sains Malaysia, Penang Malaysia

Syed Mohamad Syed Abdullah

Universiti Sains Malaysia, Penang Malaysia

Abdul Hafiz

Association of Moslem Community in ASEAN (AMCA) Thailand

Scientific Committee

Diah Karmiyati

University of Muhammadiyah Malang, Indonesia

Rohimi Binti Che Aman

Universiti Sains Malaysia, Penang Malaysia

Proceedings Article

Relation Social Support and Psychological Well-Being among Schizophrenic Patients: Self-Care as Mediation variable?

Latipun Latipun, Diny Rezki Amalia, Nida Hasanati

The subjective well-being on schizophrenic patients is influenced by many aspects, especially family support. However, the influence is not always in a direct affection; it may through self-care. The present study is aimed at finding out the influence of family support toward well-being through self-care...

[+ Article details](#)

[+ Download article \(PDF\)](#)

Proceedings Article

Anxiety About Aging: Cultural Value Masyarakat Toraja

Lusy Asa Akhrani, Grace Eka

This study has been made with the purpose to find out the relationship between cultural values and anxiety about aging. The subjects of this study were Toraja people of middle age

Relation Social Support and Psychological Well-Being among Schizophrenic Patients: Self-Care as Mediation variable?

Latipun Latipun
University of Muhammadiyah Malang
lativ_un1@yahoo.com

Diny Rezki Amalia
University of Muhammadiyah Malang

Nida Hasanati
University of Muhammadiyah Malang

Abstract. The subjective well-being on schizophrenic patients is influenced by many aspects, especially family support. However, the influence is not always in a direct affection; it may through self-care. The present study is aimed at finding out the influence of family support toward well-being through self-care as mediator on schizophrenic patients. The subjects of this study were 108 patients of a psychiatric hospital at South Kalimantan. The instruments used were Subjective Well-being Under Neuroleptics Scale (SWNS) to measure the subjective well-being of the subjects, Perceived Social Support-Family Scale (PSS-Fa) to investigate the family support experienced by the subjects, and Self Care Assessment Tools to assess the self care of the subjects. Regression analysis was applied to figure out the influence of exogenous variable toward endogenous variable and to examine the influence model among variables. The result of data analysis revealed that family support possessed higher influence toward the subjective well-being, therefore self-care could not be the influence mediator of family support toward the subjective well-being on schizophrenic patients.

Key words: Schizophrenia, well-being, family support, hope, self care

Introduction

The psychological well being is usually connected with the absence of mental disorder. Actually, individual with the mental disorder is basically has experienced the psychological well being, but at a limited level. Generally is described that patients with mental disorder have a lower welfare than the general population (Makara-Studzinska, Wolyniak, & Partyka, 2011). So the psychological well-being is inversely proportional to the number of symptoms or severity of natural disturbances of an individual.

The individual or family task is help seeking to overcome the psychological disorders for him-self or his family. Treatment and any efforts to restore the patient's condition is not just want to be free of disorders, but in the longer term wish to obtain psychological wellbeing. The various studies about it have been done (e.g. Brunt & Hansson, 2002; Hayes, 2014; Naber, et al., 2001) and those as evident that the psychological well-being is an important part for individuals, whether healthy or experiencing the psychological problems, including individuals who have experienced the schizophrenia.

The Psychological well-being can be an indicator of an individual's mental health status. The Recovery of an individual's mental health is characterized by levels of stability and steadiness of psychological well-being. Although individuals cannot always maintain the mental health condition in a stable state, but strengthening the mental state is very helpful for individual mental recovery.

Social support is an important factor for the realization of individual's psychological well-being. Social support from their close environment, especially the family is greatly contributed in developing the well-

being of individuals with mental disorders (Corrigan, 2003). Unfortunately, many individuals who have experienced the mental disorders, such as schizophrenics, do not obtain adequate a family support (Brunt & Hansson, 2002), even many who treat them not just as socially isolating.

In fact many who treat themis not appropriate as a socially isolating. Some research concludes that the family support were significantly influence the subjective well-being of schizophrenics (Sharir, Tanasescu, Turbow, & Maman, 2007; Siedlecki, Salthouse, Oishi, & Jeswani, 2013). In general, people who suffers chronic disorders also needs the family support (Krola, Sanderman, Suumrmeijerb, and Theo, 1993; Cechnicki, Wojciechowska & Valdes, 2008). Rudnick & Kravetz (2001) expressly states that the family support can increase the potential for recovery in schizophrenia.

The results of the research which conducted by Broderick and Scrader (1981) explains that the family could be a cause of schizophrenia disorder but the family could also be decisive for the healing of the family as long as willing to cooperate with the therapist. People with a mental disorder that gained a little or no even support from their immediate environment can cause inhibition of positive activities in such patients. In the absence of positive activities of the patients, he/she tend to get more miserable, and reduce the well-being and quality of their life (Yadav, 2010).

For a certain cases where the schizophrenics are not convinced of the effectiveness of the treatment in which they live, a social support did not affect the psychological well-being of individuals (Rudnick & Kravetz, 2001). However, the family support is very important for the individuals, especially in providing the

necessary care and support of individuals. This family support can foster of hope and motivation to live longer and better, while reducing anxiety of individuals, the opposite of it, have a little or no social support is available to make the people feel worthless and isolated (Toifur & Prawitasari, 2003). Therefore it is necessary also to examine whether social support influences the hope of the people for the healing.

In a society that is more oriented to family ties, as happened in Indonesia, the support of family is very important of the individuals with mental disorders such as schizophrenia. They do not only depend on the medication given by the professionals, it is precisely the attention, assistance and cares to remind the individual is very important to the people more healthy and independent. Throughout the treatment process, people with schizophrenia are need assistance everyday run by his family. Thus, the psychological well-being in patients with schizophrenia can be achieved if the gain good support from his family. Nevertheless, the psychological well-being is becoming stronger had he had the ability to care for they are good also.

Individuals with schizophrenia need to keep their ability during self-care. Essock & Kontos (2005) reported that the adequate effort self-care is very needed for the individuals with schizophrenia. Nevertheless, it is difficult for those with schizophrenia to apply the self-care independently without the support of their family. Supporting is needed to raise awareness of individuals in performing self-care such as eating, drinking, dressing, rest, and other measures for the safety (Susanti, 2010).

The research from Arsove, Bahraktarov, Barbov, & Hadzihamza (2014) added that if the medical treatment and psychosocial therapy at home combined with social support of the people nearby, it will make the ability of schizophrenics by doing self-care is getting better. With this matter, it is possible to provide a positive opportunity for the patients to obtain a good welfare. Based on the above the purpose of this study was to examine the patient himself as a mediator variable on the influence of family support on subjective well-being in patients with schizophrenia of the outpatients.

Method

Procedure and Research Subject

The subjects of this study were out of 108 schizophrenic patients at the psychiatric hospital in South Kalimantan, Indonesia. They were willing to participate in the research, by way of direct filling scales and hand back the scale at the specified time. They were about 24-52 years old ($M=34.7$; $SD = 12.1$), which consisted of 63 male subjects and 45 female subjects. Most of the subjects that have been married were about 49 subjects, 18 subjects with widower status, 19 subjects with a widow and the remaining are not yet married. The subjects with Senior High School graduates were about 62 subjects more than the number of the subjects with High School (78 subjects), Diploma (28 subjects) and Degree (12 subjects).

Instrument

Subjective of Well-Being under Neuroleptics Scale (SWNS, Naber et al., 2001) was used to measure the subjective of well-being that is the patient's perception concerning the health status, treatment is carried out and the aspect of non-medical in their lives (Haring, Mottus, Jaanson, Pilli, Magi, & Marom, 2013). SWNS is consists of five aspects of mental functioning, self-control, emotional regulation, physical functioning and social integration. SWNS is consists of 20 items with six possible answers: (1) never, (2) almost never, (3) rarely, (4) sometimes, (5) frequently, and (6) always. Sample of item: "I have no hope for the future." SWNS score range is 6 to 120, the higher the score which obtained the higher subjective well-being of individuals. SWNS have an internal consistency with $\alpha = .83$ (Haring et al, 2013). The results of reliability testing which conducted in South Kalimantan was obtained the internal consistency with $\alpha = .82$.

Family support is measured by the *Perceived Social Support- Family Scale* (PSS-Fa, Procidano & Heller, 1983). PSS-Fa is consists of 20 items with three possible answers, such as: (1) yes, (2) no, and (3) do not know. Sample of item: "Family providing the moral support which I need." PSS-Fa score range is 1 to 19, which indicates the higher score of the subject the higher yet supports of the family. PSS-Fa has an internal consistency with $\alpha = .90$ (Procidano & Heller, 1983). The results of reliability testing which conducted in South Kalimantan was obtained the internal consistency with $\alpha = .78$.

Self-Care Assessment Tool (SCAT) was instrument to measure how well of an individual in treating or addressing the needs of himself/herself (Saakvitne & Pearlman, 1996). The scale was divided into five aspects of the measure: physical, psychological, emotional, spiritual, and jobs. SCAT is consists of 64 items that has five choices to answer, those are: often, sometimes, rarely, never, never will. Sample of item "I do a common treatment for the prevention of disease." SCAT score range from 47 to 235; the high score is the score of indicating the self-care of the subject is good. SCAT has an internal consistency with $\alpha = .86$ (Miller & Chan, 2003). The results of reliability testing which conducted in South Kalimantan was obtained the internal consistency with $\alpha = .85$.

Data Analysis

Quantitative testing of the hypothesis is done in two phases. First, to analysis whether the predictor variable (social support), proposed as a mediator variable (self-care), and the independent variable (psychological well-being) which distributed normally and qualify for further analysis. Second, to analysis the function of mediating variable (self-care) in relationship of the social support variable with psychological well-being variable. The data analysis is done by using regression analysis with procedures developed by Hayes (2004).

Results

Description of the Research Variables

There are three variables in this study which is the family support, subjective well-being, and self-care. As stated in Table 1, the descriptive statistics indicating that the participant reported that a score of the family support in the range scores of 6-19 ($M = 13.03$; $SD = 3.42$), subjective well-being in the range scores of 51-97 ($M = 76.96$; $SD = 8.33$), and self-care showed the range scores of 28-218 ($M = 162.46$; $SD = 22.73$). Test correlation between the variables research is showed that the three variables study had a significantly positive correlation. Thus, the regression analysis to determine the effect of free variable to variable mediator and variable bound to be forwarded.

Analysis of Regression Test

This study is hypothesized the self-care as a mediating variable in the relationship with the family support of psychological wellbeing of patients with schizophrenia. To test this hypothesis, data were analyzed the relationship variable of the family support as predictor and the variable self-care as a potential of mediating variables (MV). Further testing of the variable relationship of the family support as a predictor, the variable self-care as a potential mediating variable, and psychological well-being as DV. To determine whether the hypothesis is accepted, the analysis were used the Sobel Test (Hayes, 2004). The hypothesized mediation models were tested with the Process developed by Hayes.

The analysis results is showed that the variables of family support significantly and positively as a predictors of the well-being subjective variable ($\beta = .44$; $p = .00$) and the self-care ($\beta = 1.39$; $p = .03$). The variable of self-care also significantly and positively as a predictor variables of the psychological well-being ($\beta = .27$; $p = .00$). The results of this analysis indicate that there are direct effects on the family support variable of the psychological wellbeing and self-care variable, and there are direct effects of self-care variable to the psychological well-being.

Based on the Sobel test indicated that the self-care variable significantly as a mediator variable relationships of the variable family support on psychological well-being ($Z = 2.15$, $p = .03$). The indirect effect of family support to the psychological well-being (estimate=.37) was significant as indicate by the bootstrapped 95% CI=.09-.74. The results were showed the effect of mediation on a model that shows their mediating role is shown in Table 2 and Figure 1.

Discussion

The results were showed that taking care of themselves as mediating variables of the family support relationship to the psychological well-being. The psychological well-being of the patients with schizophrenia is basically caused by the family support. However, the welfare of the patient it is better through the ability in performing the self-care. It shows that family support was most influenced on the patient's psychological well-being if it has the ability to perform the self-care. The important point of this study is the influence of the family support of the subjective well-being with self-care mediation has a powerful influenced than the direct influence of the family support to the psychological well-being. With this matters showed that the role of mediating variables, which is so called self-care of the subjective well-being is very important, and more powerful influenced than with a direct relationship of the psychological well-being of the family support.

The family support was significantly and positively as predictors of subjective well-being of the people with schizophrenia. Means, the more family support was obtained the schizophrenia subjects is more high their subjective wellbeing. The results of this research are consistent with previous studies which conducted by Cechnicki, et al. (2008) which states that the patients with schizophrenia who have more family support and more fulfilling may enjoy a higher welfare. The evidence is showed that the family support is a very important role in improving the subjective well-being of the patients with schizophrenia.

Table 1. Description of research data

Variable	Score Range	Mean	SD	2	3
1. Family Support	6-19	13.03	3.42	.33**	.79**
2. Subjective well being	51-97	76.96	8.33	-	.77**
3. Self-care	98-218	162.46	22.73		-

Note: ** $p < .01$

Table 2. Mediation effect of family support on psychological well-being through self-care (n=108)

Path effect		SE	t	p
Family to self-care	1.39	.63	2.19	.03
Self-care to PWB	.27	.02	11.96	.00
Support to PWB	.44	.15	2.93	.00
Bootstrapped results for indirect effect				
	Effect	SE	LL 95% CI	UL 95% CI
Self-care	.37	.17	.09	.74

Note: $Z=2.15$ $p=.03$

Support = family support; PWB = psychological well-being; LL = lower limit; UL = upper limit; CI = confidence interval.

The result also proves that the family support becomes a predictor of the self-care. This is consistent with the research which conducted by Arsove et al., (2010) which stated that the patients were benefited directly by the support of the family is will be more comfortable with him/herself so that the provision of family support can make the ability of schizophrenic patients to perform self-care is getting better. The first study which conducted by Bustilo, Lauriello, Horan, and Keith (2001) regarding self-care in schizophrenia, where the family support is given to patients with schizophrenia are only limited on the support so that patient compliance with medical treatment alone. Although it is effective, but the most effective treatment for the patients with schizophrenia is a combination of medication and psychosocial therapies such as family therapy that the family teaches to provide social skills to help the patients to be more independent again in performing self-care.

Patients with schizophrenia are usually tolerated by their family situation. The treatment over daily tasks, such as bathing, feeding, maintaining the health and others, in a society in Indonesia is carried out by a family or a little neglected. Their independence to perform self-care is less developed. They are capable of self-care if it has a relatively good awareness and the development of their health restored. So the influence of the family support to the self-care is the reasons due to low factor independence subject. Similarly, the self-care variables also influence the subjective well-being. The positive influence of self-care to subjective well-being as revealed in this study is shown that the higher ability of self care that they do is the higher their psychological wellbeing. The Results of research which conducted by Arsove, et al., (2014) he mentioned the social functioning of an individuals with schizophrenia in taking good self-care and have inexperienced barriers will make the high welfare of schizophrenics.

The results of this study is indicated the importance of the availability of family support that was provided to the patients with schizophrenia. The influence of the family support to be expected is self-care, as well as subjective well stressed needs for the families to well treatment of the patients with schizophrenia. The support and attention of the family, fulfilling the needs of a viable and convenient communication that can encourage to the patients to raises the hope to become a better person and to improve their self-care behaviors.

The statement is also confirmed by the statement of Dolan, Canavan, & Pinkerton (2006) that family support can strengthen of every individual, creating the warmth of the family, to give attention with the schizophrenic patients, has the potential to create prevention strategies are the main good for the entire family as well as the schizophrenic in facing the challenges of everyday life and always interaction in society despite of being in a neighborhood full of pressure.

Conclusion

Based on the results of the test which being done, finally that the direct support of the family has a

significant influence on self-care and on subjective well-being. Being self-care also has a significant effect on subjective well-being. Indirectly, also it was found in the family support is affecting the psychological welfare subjects by the patient self-variable. Thus, this study proves that the self-care is a mediator variable in relation to the subjective well-being of the family support.

Recommendation

To improve the welfare of individuals with schizophrenia is required to the family-based treatment is very important. The said family support is aimed to strengthening the ability of individuals to perform self-care. The results of this study is to support that psychotherapy and counseling interventions which are based that the family members gives hope to improve the welfare of the patients with schizophrenia.

References

- Arsove, S., Bahraktarov, S., Barbov, I., & Hadzihamza, K. (2014). Patients with schizophrenia and self-care. *Journal of Medical Sciences*, 7(2), 289-292
- Broderick, C., & Schrader, S. (1991). The history of professional marriage and family therapy. In A. S. Gurman & D.P. Kniskern (eds.). *Handbook of Family Therapy* (Vol. 2, pp 1-42). New York: Brunner-Mazel
- Brunt, D., & Hansson, L (2002). The social networks of persons with severe mental illness in patients-settings and supported community settings. *Journal of Mental Health*, 11(1), 611-618
- Bustillo, J., Lauriello, J., Horan, W., & Keith, S. (2001). The psychosocial treatment of schizophrenia an update. *The American Journal of Psychiatry*, 1(2), 163-175
- Cechnicki, A., Wojciechowska., & Valdez, M. (2008). The social network and the quality of life people suffering from schizophrenia seven years after the first hospitalisation. *Archived of Psychiatry and Psychotherapy*, 2(1), 31-38
- Corrigan, P. W. (2003). Towards an integrated, structural model of psychiatric rehabilitation. *Psychiatric Rehabilitation Journal*, 26(2), 346-360
- Dolan, P., Canavan, J., & Pinkerton, J. (2006). *Family support as reflective practice*. London: Jessica Kingsley Publisher
- Essock, S., & Kontos, N. (2005). Implementing assertive community treatment teams. *Psychiatr Serv*, 46(2), 679-683
- Haring, L., Mottus, R., Jaanson, P., Pilli, R., Magi, K., & Marom, E. (2013). subjective well-being under neuroleptics scale short form (SWN-K): Reliability and Validity in an Estonian Speaking Simple. *Annals of General Psychiatry*, 12(1), 1-10
- Hayes, L. (2014). *Hope and recovery in a family treatment for schizophrenia: A program evaluation of a family psychoeducational intervention*. Thesis. Melbourne: Departement of Psychiatry, The University of Melbourne

- Krola, B., Sanderman, R., Suumrmeijerb, & Theo, P. B. M. (1993). Social support, rheumatoid arthritis and quality of life: *Concepts, Measurement and Research*, 20(1),1-120
- Makara-Studziska, M., Wołyniak, M., & Partyka, I. (2011) The quality of life in patients with schizophrenia in community mental health service – selected factors. *Journal of Pre-Clinical and Clinical Research*, 5(1), 31-34
- Miller, W., & Chan, C. (2003). *Self care assessment tool (SCAT)*. Ministry of Community, 101(3),1-4
- Naber, D., Moritz, S., Lambert, P., Holzbach, R., Mass, R., Andersen, B., Frank, P., Rudger, H., Reinhard, M., & Burghard, A. (2001). Improvement of schizophrenic patients, subjective well-being under typical antipsychotic drugs. *Schizophrenia Research*, 50(1),79-88
- Procidano, M.E., & Heller, K. (1983). Measures of perceived social support from friends and from family: three validation studies. *American Journal of Community Psychology*, 11(1), 1-24
- Rudnick A., & Kravetz S (2001). The relation of social support-seeking to quality of life in schizophrenia. *Journal of Nervous and Mental Disease*, 189(4),258-262
- Saakvitne, K. W., & Pearlman, L. A. (1996). *Transforming the pain: A workbook on vicarious traumatization*. London: W. W. Norton.
- Sharir D., Tanasescu M., Turbow D. & Maman Y. (2007). Social support and quality of life among psychiatric patients in residential homes. *International Journal of Psychosocial Rehabilitation*, 11(1),85-92
- Siedlecki, K., Salthouse, T., Oishi, S., & Jeswani, S. (2013). The relationship between social support and subjective well being across age. *Soc. Indic. Res*, 117(4), 561-576
- Susanti, H. (2010). Defisit perawatan diripada klien skizofrenia: aplikasi teori keperawatan. *Jurnal Keperawatan Indonesia*, 13(2),87-97
- Yadav, S. (2010). Perceived social support, hope, and quality of life of persons living with HIV/AIDS: a case study from Nepal. *Springer Science Business Media*, 21(2),14-20

4th ASEAN Conference on Psychology, Counseling, and Humanities (AC-PCH) 2018
Enhancing Awareness to Optimize the Quality of Life



Supported by:



CERTIFICATE

Committee proudly presented to:

LATIPUN

as

PRESENTER

4th ASEAN Conference on Psychology, Counseling, and Humanities (AC-PCH) 2018
in Tapee University, Surat Thani, Thailand, November 09-10, 2018

Chair AC-PCH 2018

Abdul Hafiz Hiley, Ph.D

President of Tapee University,

Dr. Quandee Sripairoj